## RECEIVED

## STATE OF SOUTH DAKOTA

DEC 2 8 2015

## Statement of Legal Newspaper Ownership and Cisecioksing

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077		
1. TITLE OF NEWSPAPER STAR		2. DATE 9-24-15
3. FREQUENCY OF ISSUE 3A. NO. OF ISSUES PUBLIS  Weekly  1. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF	PR	LICE \$ 49.99 50.90
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code)  (Not printers)  Tri-City Star Po Box 621 White SD 57276 Brookings  5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE		
RED News Group Inc. 207 Kasan Ave Volga 57071		
6. FULL NAME OF PUBLISHER! Linda R. Schumacher		
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.  FULL NAME  COMPLETE MAILING ADDRESS		
Linda R. Schumacher		
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.		
9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES
A.TOTAL NO. COPIES (Net Press Run)	450	450
B.PAID AND/OR REQUESTED CIRCULATION  1. Sales through dealers and carriers, street vendors, counter sales, and paid electronic copies.	2	2
2. Mail Subscription (Paid and or requested)	332	328
C.TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1 and 9B2)	.334	330
D.FREE DISTRIBUTION  1. BY MAIL, CARRIER OR OTHER MEANS	38	38
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	15	15
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	387	383
F. COPIES NOT DISTRIBUTED  1. Office use, left over, unaccounted, spoiled after printing	63	67
2. Return from News Agents		
G.TOTAL (Sum of E, F1 and F2 – Should equal net press run shown in A)	450	450
Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public I swear that the statements made by me are true, correct, and complete:		
Kirlin K Dchumuchen Lublisher (Title)		
Stote of South Delete Sworn to before me this 24day of Lept, 20 15		
State of South Dakota  State of South Dakota  ROPIEM  Notary Public  Notary Public		
county of contrary state of		
(Seal)		
Form: SOS REC 051 8/2014  PUBLIC SEAL  SEAL  SOUTH OR SOU		